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Developing interventions to reduce the spread of HIV and other sexually transmitted infections among heterosexual men, couples and ethnically diverse populations continues to be complex and challenging. To help address this issue, NIMH awarded a two-year grant to David Pérez-Jiménez, Ph.D., at the University of Puerto Rico, to support the adaptation and assessment of an HIV and other sexually transmitted infection intervention designed for young, heterosexual Latino couples. This grant will use funds allocated to NIMH through the American Recovery and Reinvestment Act to promote economic recovery and spur advances in science and health.

"With Recovery Act funds, we're now able to support a number of meritorious and innovative research studies, such as proposed by Dr. Pérez-Jiménez, that were simply out of reach of our existing budget," said NIMH Director Thomas R. Insel, M.D. "Our plan is to use Recovery Act funds not only to support meritorious proposals that were previously out of reach, but to supplement current efforts, expediting progress towards our goal of profoundly reducing HIV infection."

The researchers plan a two-part study to modify and test an HIV and other sexually transmitted infection prevention program according to the Information-Motivation-Behavioral Skills (IMB) model of behavior change. This program will be the only known intervention for young Latino couples based on the IMB model. Widely used in HIV/AIDS prevention research, this model is based on the premise that risk reduction and prevention behavior relies on having information about how HIV/AIDS and other sexually transmitted infections are spread. Participants also learn specific methods for avoiding infection, reasons to change their behavior, and behavioral skills to do preventive acts.^[1]

The intervention focuses on:

- Providing basic and accurate information about HIV/AIDs and safer sex practices
- Discussing social norms and gender roles in relationships, which may help address cultural values that minimize a man's responsibility in enacting safer sex practices and

undermine a woman's willingness and power do so

- Developing positive attitudes, skills and self-confidence toward safer sex practices
- Identifying social factors that can help or hinder safer sex practices.

The researchers will deliver the group-format intervention over five weekly three-hour sessions. The main goals of the intervention are increasing condom use and monogamous relationships and decreasing risky sexual behaviors and the number of sexual partners.

In the first part of the study, the researchers will use focus groups, interviews, and other testing strategies to adapt the intervention for young heterosexual Latino couples. The participants' feedback and results of pilot testing will help inform the second part of the study, in which 75 couples at risk of infection with HIV or a related disease will be randomly assigned to the intervention group or a control condition.

Participants in the intervention group will receive the adapted intervention, and control group members will receive life skills intervention over the five-week period. The control condition will focus on providing basic information that is relevant to the participants but not included in the intervention. Examples of life skills topics that will be explored in the control group are identifying the importance of self-esteem, learning appropriate attitudes and techniques to manage conflicts, and being motivated in the face of life's challenges.

The researchers will evaluate the effectiveness of the intervention at a three-month follow-up, based on self-reported condom use and the self-reported number of unsafe sexual behaviors.

The mission of the NIMH is to transform the understanding and treatment of mental illnesses through basic and clinical research, paving the way for prevention, recovery and cure. For more information, visit www.nimh.nih.gov.

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1 Fisher JD, Fisher WA. Changing AIDS-risk behavior. *Psychol Bull.* 1992 May;111(3):455-74.

The activities described in this release are being funded through the American Recovery and Reinvestment Act (ARRA). To track the progress of HHS activities funded through the ARRA, visit www.hhs.gov/recovery . To track all federal funds provided through the ARRA, visit www.recovery.gov